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APPLICANTS

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** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

AUSTRALIA 2002952743 11/19/2002

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY **

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Verified and Acknowledged	/JEFFREY C YAKULIS/ Examiner's Signature	Initials	AUSTRALIA	10	18	2

ADDRESS

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TITLE

Electrocoagulation system

FILING FEE RECEIVED 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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